

18
9-18-00

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | Phr | 67814 | 8/3/00 |
| O.I.P.E. CLASSIFIER | | 8 | 8-700 |
| FORMALITY REVIEW | AL | | 9/14/00 |
| RESPONSE FORMALITY REVIEW | LH | 60105 | 3-7-0 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|--------|
| 1 | ✓ | ✓ | 4/5/00 |
| 2 | ✓ | ✓ | 10/2 |
| 3 | ✓ | ✓ | |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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Best Available Copy